



TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/045,694	
	Filing Date	10/19/01	
	First Named Inventor	Cox et al.	
	Group Art Unit	9867	
	Examiner Name	A. M. Farah	
Total Number of Pages in This Submission	12	Attorney Docket Number	1223P030

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>): Postcard;
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account No. 50-1546.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm and Individual name	Bond, Schoeneck & King William Greener Reg. No. 38,165
Signature	
Date	December 7, 2004

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: December 7, 2004		
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IFW

PATENT CASE NAME/No. 1223P030

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	Cox et al.	P02929US
Serial No:	10/045,694	Group Art Unit: 9867
Filing Date:	10/19/01	Examiner: A. M. Farah
Title:	METHOD AND SYSTEM FOR IMPROVING VISION	RESPONSE

Commissioner for Patents
P.O Box 1450
Alexandria, VA 22313-1450

RESPONSE TO THE EXAMINER'S OFFICE ACTION

Sir:

In response to the Office Action dated September 9, 2004, Applicant respectfully submits the following attached pages for the Examiner's review and reconsideration of the application:

Claims (pending);

Remarks.